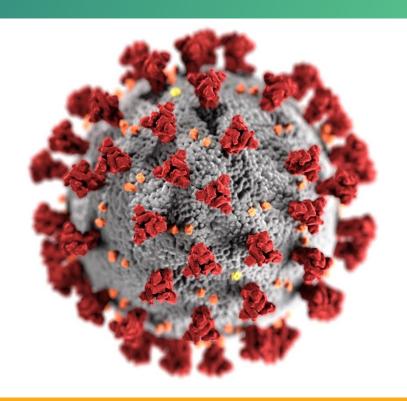
Interim Clinical Considerations for Novavax COVID-19 Vaccine

Elisha Hall, PhD
Clinical Guidelines Lead

Advisory Committee on Immunization Practices Meeting

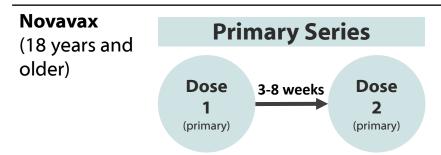
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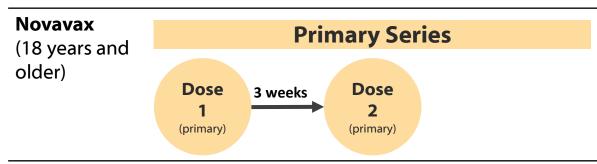


Novavax COVID-19 Vaccination Schedule

People who are **NOT** moderately or severely immunocompromised



People who **ARE** moderately or severely immunocompromised



Doses NOT Currently Authorized

- For people receiving a Novavax COVID-19 Vaccine primary series, the following are <u>NOT</u> currently authorized:
 - Third primary dose for people who are moderately or severely immunocompromised
 - Booster dose using ANY COVID-19 vaccine after a Novavax primary series
- CDC provides clinical guidance for what FDA authorizes; once authorized, these doses can be added to the COVID-19 vaccination schedule

Mixed Primary Series

- The same vaccine product should be used for all doses in the primary series.
- There are limited data on the safety and efficacy of a mixed primary series composed of any combination of Moderna, Novavax, and Pfizer-BioNTechCOVID-19 vaccines.
- If a mixed primary series is inadvertently administered
 - The series is complete, and doses do not need to be repeated
 - This is considered an error; report to the Vaccine Adverse Event Reporting System (VAERS)

Mixed Primary Series, Continued

- If a person starts but is unable to complete the primary series with the same COVID-19 vaccine **due to a contraindication**, any other ageappropriate COVID-19 vaccine may be administered to complete the series at a minimum interval of 4 weeks (28 days) from the last COVID-19 vaccine dose.
- This would not need to be reported to VAERS.

Coadministration

- In general, COVID-19 vaccines may be administered without regard to timing of other vaccines.
 - Same day
 - ✓ Any time before
 - ✓ Any time after
- Routine administration of all age-appropriate doses of vaccines simultaneously is recommended for people for whom no specific contraindications exist at the time of the healthcare visit.
- There are additional considerations for orthopoxvirus vaccines.

Coadministration

- When deciding whether to coadminister another vaccine(s) with COVID-19 vaccine, providers may consider:
 - Whether a person is behind or at risk of becoming behind on recommended vaccines
 - Likelihood of the person returning for another vaccination
 - Person's risk of becoming infected with a vaccine-preventable disease
 - Person's risk for severe disease if infected
 - ✓ Reactogenicity profile of the vaccines

Coadministration

• Additional consideration for orthopoxvirus vaccination:

If orthopoxvirus vaccine administered first: Might consider waiting 4 weeks before receiving a Moderna, Novavax, or Pfizer-BioNTech vaccine



If Moderna, Novavax, or Pfizer-BioNTech administered first:

No minimum interval necessary before receiving orthopoxvirus vaccination for prophylaxis in the setting of an outbreak



Novavax COVID-19 Vaccine: Preparation and Administration



Age indication: 18 years and older



Dose: 5 mcg SARS-CoV-2rS 50 mcg Matrix-M[™] adjuvant



Injection volume: 0.5 mL



Preparation: Do not dilute



Doses per vial: 10 doses



Intramuscular/deltoid

Novavax COVID-19 Vaccine: Storage



Storage: Refrigerator 2° to 8°C (36°to 46°F)



DO NOT FREEZE



Beyond use time: 6 hours after first puncture



Expiration:
No expiration date
is printed on the
vial or carton

www.NovavaxCovidVaccine.com

Types of COVID-19 Vaccines

mRNA

- Moderna
- Pfizer-BioNTech

Adenovirus vector

Janssen

Protein subunit

Novavax

Contraindications & Precautions

- Contraindications
 - History of a severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component Novavax COVID-19 Vaccine
 - History of a known diagnosed allergy to a component of Novavax
 COVID-19 Vaccine

Contraindications & Precautions

- People with an allergy-related contraindication to one type of COVID-19 vaccine have a contraindication or precaution to the other type of COVID-19 vaccines
 - Contraindication: People with a known allergy to polysorbate have a contraindication to both Novavax and Janssen
 - In all other cases, an allergy-related contraindication to one type of COVID-19 vaccine is a precaution to the other types

Contraindications & Precautions

Precautions

- History of an immediate allergic reaction to any vaccine other than
 COVID-19 vaccine or to any injectable therapy
- History of a non-severe, immediate (onset less than 4 hours) allergic reaction after a dose Novavax COVID-19 Vaccine
- Moderate or severe acute illness, with or without fever
- History of MIS-C or MIS-A
- History of myocarditis or pericarditis after a dose of an mRNA or Novavax COVID-19 vaccine

Myocarditis and Pericarditis

- Myocarditis or pericarditis after a dose of an mRNA or Novavax:
 - Precaution to a subsequent dose of any COVID-19 vaccine
 - Considerations for subsequent vaccination include:
 - Whether myocarditis or pericarditis was considered unrelated to mRNA or Novavax vaccination
 - Personal risk of severe acute COVID-19
 - Timing of immunomodulatory therapies
 - For people ages 18 years and older who choose to receive a subsequent COVID-19 vaccine, some experts advise using Janssen
 - People choosing Janssen should be informed of the risk of thrombosis with thrombocytopenia syndrome; the highest risk is in females ages 30– 49 years

Myocarditis and Pericarditis

- History of myocarditis or pericarditis prior to COVID-19 vaccination
 - Not a precaution
 - May receive any currently authorized or approved vaccine after the episode of myocarditis or pericarditis has resolved

Extended Interval Between Dose 1 & 2

- No specific data on extended interval between dose 1 & 2 of Novavax
- Evidence of benefits of an extended interval in mRNA recipients
 - The small risk of myocarditis and/or pericarditis associated with mRNA
 COVID-19 vaccines might be reduced and peak antibody responses
 - Vaccine effectiveness may be increased
- Therefore an 8-week interval may be used between dose 1 & 2 to potentially reduce the risk of myocarditis and/or pericarditis

Considerations for Extended Interval Between Dose 1 & 2

3-week interval

- People who are moderately or severely immunocompromised
- People ages 65 years and older
- When protection needs to be achieved soonest
 - High risk for severe disease
 - Living, working, or traveling to an area with high COVID-19 community levels

8-week interval

- Reduced myocarditis risk
 - Young adult males
- Optimize vaccine effectiveness

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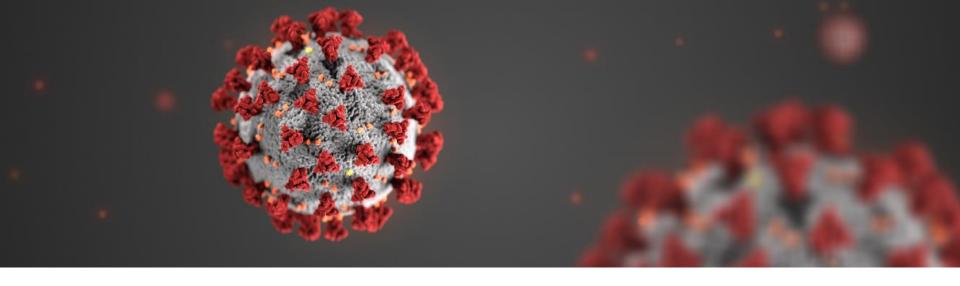
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For more information, contact CDC 1-800-CDC-INFO (232-4636) TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

